

Strong Parenting, Successful Youth: The Parent Training 10 States are Providing to Foster Families

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Lack of skill in managing children's behavior is a primary reason that foster parents stop providing care and children are bounced from placement to placement. Carefully designed and evaluated programs help foster youth succeed by strengthening the parenting skills of foster and birth parents. For chronically delinquent foster boys, Multidimensional Treatment Foster Care (MTFC) decreased delinquent behaviors and increased days spent living with parents or relatives. In an adaptation of MTFC, foster girls referred from the juvenile justice system were less likely to become pregnant and to be incarcerated. For every dollar spent on MTFC, taxpayers saved \$17 in criminal justice and victim costs by the time youth were 25 years old. KEEP, a less-intensive adaptation for "regular" foster youth, reduced behavior problems and placement instability. KEEP Safe, a preventive adaptation for foster girls entering middle school, lowered substance use and placement instability. With effective parenting, foster youth also learned how to be more responsible family members and friends.

Child welfare services in the United States are estimated to cost about \$20 billion per year. Despite this public investment, little research guidance is available. In even shorter supply are "gold standard" studies with random assignment to treatment and comparison conditions. Based on a solid body of evidence, one of the strongest predictors of positive child and youth development is effective parenting, and one of the strongest predictors of behavior problems is ineffective parenting. Parent training is one of the most thoroughly evaluated interventions. Yet research has seldom examined its effectiveness in the foster care system, even though parent training is mandated by federal law and state statutes in Wisconsin and many other states.¹

Most foster parents receive some training on how to handle difficult behaviors, although parent management skills typically are only a small part of the curriculum. Moreover, parents seldom receive feedback on how well they are applying parenting skills to the children in their care. So it is not surprising that most of the training programs for foster parents have been ineffective in changing child behaviors.² Lack of skill in managing children's behavior is a primary reason that foster parents stop providing care and children are bounced from placement to placement.³ Multiple placements are hard on kids and bad for taxpayers. Kids benefit from stability in their family relationships, peer networks, and school settings. Moreover, multiple placements are costly, with each change estimated to require 25 extra hours in caseworker and staff time.⁴

In this chapter, I overview my 30 years of work to improve outcomes for foster youth by strengthening the parenting skills of birth and foster parents. These programs aim to turn around the lives of foster youth who are already in trouble with the law, and also to build resiliency in foster kids to prevent them from going down the wrong path. I will briefly overview Multidimensional Treatment Foster Care, the first program that my colleagues and I developed for seriously delinquent foster youth. This program has been successfully adapted for other foster youth—

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those with severe emotional and behavioral problems, girls referred from juvenile justice, and recently for high-risk preschoolers. Then I will describe a less intensive version designed for use in “regular” foster care known as KEEP. Finally, I will turn to a promising new preventive intervention to build prosocial skills in girls during the pivotal transition into middle school—KEEP Safe.

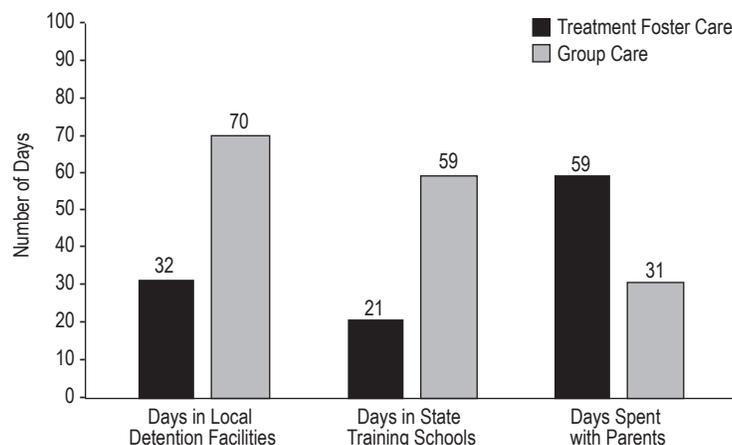
In this chapter, I describe the rigorous evaluations of each of these programs that have encouraged their adoption in states across the country. Multidimensional Treatment Foster Care for children and adolescents has been implemented in California, Maine, Maryland, New York, North Carolina, Ohio, Pennsylvania, and several countries around the world. KEEP has been implemented in California, Maryland, New York, Oregon, Tennessee, Washington, and internationally. KEEP Safe is being implemented in San Diego and Oregon.

Multidimensional Treatment Foster Care

Youth in Multidimensional Treatment Foster Care spent fewer than half as many days in detention, two thirds less time locked up in state training schools, and 60% fewer days in jail than youth in group care.

This initial intervention was aimed at boys with histories of serious, chronic delinquency. The boys averaged 14 previous criminal referrals and four previous felonies, with at least one out-of-home placement. The cornerstone of Multidimensional Treatment Foster Care (MTFC) is the foster parent who is carefully selected, supported, and trained in parent management skills. For example, both foster and birth parents (if the child will return home) learn to monitor youth whereabouts, set clear rules, track positive and negative behaviors, respond appropriately and consistently, and so forth. Parents have access to a support group, daily care from staff, and a 24-hour hotline. One year later, 41% of youth in MTFC had no criminal referrals compared to 7% of teens in group care. Compared to group care, youth in MTFC spent, on average, fewer than half as many days in detention, two thirds less time locked up in state training schools, and nearly twice as much time living with parents or relatives—the ultimate goal for all foster youth (see Figure 1). MTFC youth also spent 60% fewer days in jail.^{5,6}

Figure 1. Multidimensional Treatment Foster Care Resulted in Less Time Behind Bars and More Time With Parents



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Not only did the program reduce anti-social behavior, it also taught these high-risk kids how to be responsible members of their families and society. Parents used behavior management techniques to teach them how to act responsibly, to improve their relationships with teachers and peers, and to manage their homework.⁷ The program was similarly effective with youth with a mental illness so severe that it warranted placement in a psychiatric hospital.⁸ Given its effectiveness, Multidimensional Treatment Foster Care was chosen as a National Blueprint Program for violence prevention by the U.S. Department of Justice. In an independent assessment by Steve Aos of the Washington State Public Policy Institute (who has spoken at three Wisconsin Family Impact Seminars), the program is cost effective. For every \$1 spent on Multidimensional Treatment Foster Care, taxpayers save more than \$17 in criminal justice and victim costs by the time youth are 25 years old.

In 2000, we adapted the Multidimensional Treatment Foster Care model for girls referred from the juvenile justice system. Girls in the parent-centered program were less likely to become pregnant at 2-year follow-ups than those in group care; in fact, the girls in group care were almost 2½ times more likely to become pregnant. The girls in Multidimensional Treatment Foster Care also were more likely to be engaged in school and to be living in the community (versus being incarcerated). They used drugs less often, and were arrested fewer times.⁹ These results are particularly impressive for two reasons. First, few programs have been shown to prevent teenage pregnancy. Second, instead of being compared to no intervention, Multidimensional Treatment Foster Care was effective when compared to another active intervention—group care.

KEEP (Keeping Foster Parents Trained and Supported)

KEEP aims to reduce behavior problems in foster youth. The program also takes direct aim at increasing placement stability by strengthening the parenting skills of foster and kinship parents, particularly in managing difficult youth behaviors. KEEP is a much less intensive form of Multidimensional Treatment Foster Care that is intended for “regular” foster youth.

How Does KEEP Work?

KEEP is taught to groups of 3 to 10 parents in churches or community recreation centers. Parents receive 16 weeks of training, supervision, and support in behavior management. Positive reinforcement and discipline skills are taught. For example, parents learn how to avoid power struggles and closely monitor youth whereabouts and contacts with peers. Parents learn non-harsh discipline such as using brief time outs and removing privileges for a short time (e.g., no bike riding for 1 hour).

The 90-minute meetings are delivered by paraprofessionals who have no previous experience with Multidimensional Treatment Foster Care or other parent-focused interventions. Parenting skills, taught via videotapes and role play, are integrated into group discussions. Weekly homework is assigned so parents can practice the skills at home. Parent participation is encouraged by providing child care, refreshments, credit toward annual licensing requirements, and a \$15 reimbursement for each session. For parents who miss a session, a home visit is scheduled at a convenient time to cover the material. Commendably, 81% of parents typically complete at least 75% of the group sessions.

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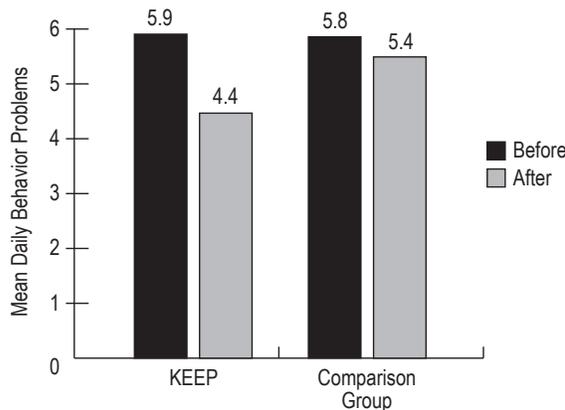
How Was KEEP Evaluated?

KEEP was recently evaluated using a “gold standard” design where 700 foster parents of children, ages 5 to 12, were randomly assigned into the treatment (KEEP) or comparison condition (caseworker services as usual). Of those contacted, 62% agreed to participate. The sample was intentionally designed to map onto real-world child welfare conditions by including all foster families receiving a new child from the San Diego County Department of Health and Human Services between 1999 and 2004. Some children had been placed multiple times and some for the first time. About one third were kinship parents (35%) and two thirds were non-relative parents (66%). The children were ethnically diverse with 33% Latino, 22% Caucasian, 21% African American, and 22% mixed ethnicity.

How Effective is KEEP?

From baseline to five months after the intervention, behavior problems were reduced among KEEP youth, but not among youth receiving standard caseworker services (see Figure 2). Reducing problems makes it easier for foster parents to manage youth behavior, and increases the likelihood youth will be returned to their birth parents, placed with kin, or adopted.

Figure 2. KEEP Reduced the Number of Daily Youth Behavior Problems



Source: "Prevention of Behavior Problems for Children in Foster Care: Outcomes and Mediation Effects," by P. Chamberlain, J. Price, L. D. Leve, H. Laurent, J. A. Landsverk, and J. B. Reid, 2008, *Prevention Science*, 9, 17-27. doi: 10.1007/s11121-007-0080-7.

Why is KEEP Effective?

To what did the researchers attribute this improvement in youth behavior in KEEP versus the comparison group? The decrease in behavior problems in the KEEP group was attributed to an increase in parents' effectiveness. Of particular importance were improvements in the proportion of positive reinforcement provided by parents. The results were especially strong for the highest-risk kids—those exhibiting more than six behavior problems per day. Overall, the impacts were modest but nonetheless important.

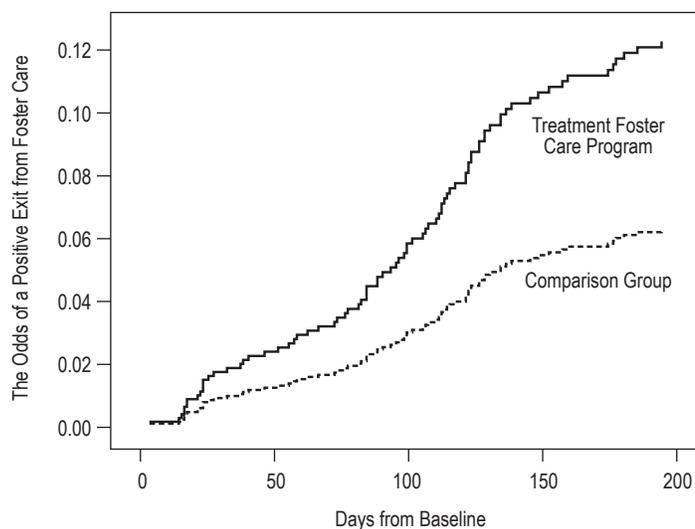
KEEP also improved the stability of foster kid placements. In this study, a positive exit from foster care was when a child was reunited with a birth parent, placed with a relative, or adopted by a suitable family. Conversely, a negative exit was a

The decrease in behavior problems among youth in the KEEP group was attributed to an increase in parents' effectiveness.

child running away, being placed in a psychiatric or juvenile detention center, or being moved to another foster family. When examined six months later, children in KEEP were nearly twice as likely to experience a positive exit as children in the comparison group (see Figure 3) and much less likely to experience a negative exit. In the comparison group, foster kids with four or more placements were at greater risk for a negative exit from foster care, but not their peers in the KEEP group. KEEP reduced the number of negative exits that typically occur for kids with a history of four or more placements; no differences were found for children with three or fewer placements.¹⁰ These results were recently replicated in a study of the Maryland KEEP program.

Children in KEEP were nearly twice as likely to experience a positive exit from foster care as children in the comparison group.

Figure 3. KEEP Increased the Odds a Foster Youth Would Have a Positive Exit from Foster Care



Reprinted from "Effects of Foster Parent Training Intervention on Placement Changes of Children in Foster Care" (p. 14), by J. M. Price, P. Chamberlain, J. Landsverk, J. Reid, L. Leve, and H. Laurent, 2008, *Child Maltreatment*, 13, 64-75. doi: 10.1177/1077559507310612. Reprinted with permission.

The KEEP Safe Intervention

Research shows greater odds of foster girls getting involved in drug use, delinquent behavior, school maladjustment, and risky sexual behaviors as they make the transition from elementary to middle school. Girls who end up in foster care are more likely than their peers to have multiple pregnancies and births, and to maltreat their own children.¹¹ What became obvious to me is that intervening early in adolescence could prevent foster girls from getting involved in these risky behaviors in the first place, changing their life course in ways that could divert them from cascading through costly social services as adults.

In the KEEP Safe model, I turned to a preventive approach, basically promoting healthy adjustment in a vulnerable population—foster girls—at a critical turning point—the transition to middle school. In larger, more impersonal, and more achievement-driven middle schools, many young people struggle to meet academic and social expectations. KEEP Safe was proactive in its design, which aimed to increase foster girls’ prosocial skills and decrease their substance use and delinquency.

How Does KEEP Safe Work?

In the spirit of prevention, the program began the summer prior to entry into middle school. The structured curriculum focused on building prosocial skills, increasing self-confidence, and resisting negative peer pressure. For example, girls learned strategies for meeting new people, maintaining positive relationships with peers, and more accurately assessing peer norms around deviant behaviors, especially participating in drug use and health-risking sexual behaviors. The sessions for girls were led by one facilitator and three assistants that allowed for individualized attention, one-on-one practicing of new skills, and frequent reinforcement of positive behaviors.

In keeping with the successful approach of my other two programs, KEEP Safe included a caregiver component for the foster parents. The training, led by one facilitator and a co-facilitator, was tailored to the daily challenges foster parents were facing and specific discipline and positive reinforcement practices that could work in their situations. Weekly homework provided opportunities to practice these techniques. KEEP Safe included six sessions of behavior management training for foster parents, and six skill-building sessions for the girls. The groups met twice a week for three weeks, with approximately seven participants in each group.

In addition, for the entire first year of middle school, weekly 2-hour follow-up services were provided for foster parents (in groups) and girls (one-on-one). Retention rates were at or above 90%.¹²

How was KEEP Safe Evaluated?

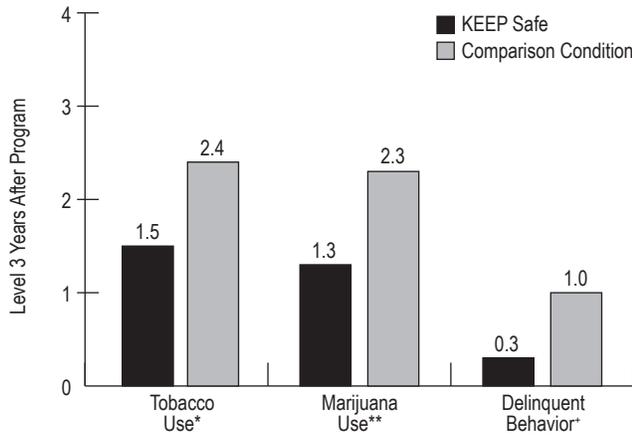
Among the study's 12-year-old foster girls, almost all reported neglect, two thirds reported sexual abuse, over one half physical abuse, and one third all three types of maltreatment.

All 10- to 12-year-old foster girls in a major metropolitan area in the Pacific Northwest were invited to participate ($N = 145$) in a “gold standard” study. Based on a coin flip, the girls and foster families willing to participate ($N = 100$) were randomly assigned to the intervention (KEEP Safe) or comparison condition (regular foster care). On average, the girls were about 12 years old. Almost all the girls (97%) had at least one reported incident of neglect, about two thirds reported sexual abuse (67%) and over one half reported physical abuse (56%). About one third (32%) reported all three types of maltreatment. Overall, about two thirds (68%) were in nonrelative foster homes and one third (32%) were in relative foster homes. The sample was 63% Caucasian, 14% multi-racial, 10% Latino, 9% African American, and 4% Native American.¹³

How Effective Was KEEP Safe?

One year after the program, girls in KEEP Safe had significantly fewer placement changes than girls in the comparison condition. Three years after the program, significant and meaningful effects were found for substance use (see Figure 4). Girls who participated in KEEP Safe reported significantly lower levels of substance use than their peers in the comparison condition. These differences occurred for tobacco use and marijuana, but not for alcohol use. In addition, KEEP Safe marginally reduced both delinquency and association with delinquent peers.¹⁴

Figure 4. KEEP Safe Resulted in Less Tobacco and Marijuana Use, and Marginally Less Delinquency



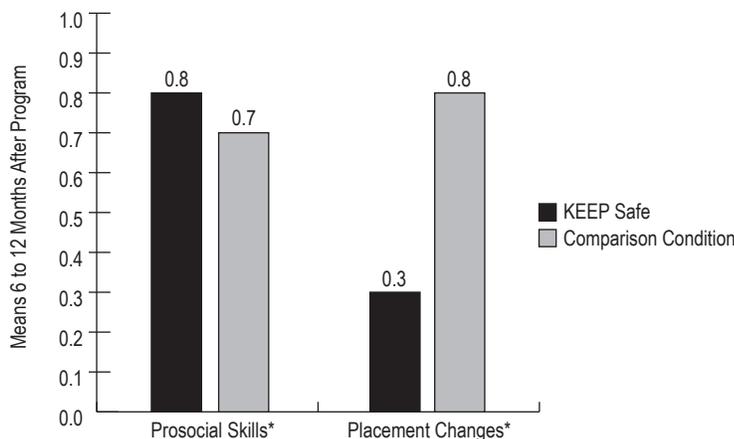
Note. Results for 100 foster care youth 3 years after the program. † $p < .10$, * $p < .5$, ** $p < .01$. Source: "Substance Use and Delinquency Among Middle School Girls in Foster Care: A Three-Year Follow-Up of a Randomized Controlled Trial," by H. K. Kim and L. D. Leve, 2011, *Journal of Consulting and Clinical Psychology*, 79, 740-750. doi: 10.1037/a0025949.

KEEP Safe was effective in reducing substance use of foster girls as they entered middle school because it increased their prosocial behaviors and stabilized their foster placements.

Why Does KEEP Safe Work?

KEEP Safe appears to be effective in reducing substance use for two reasons. As shown in Figure 5, the program increased the prosocial behaviors of foster girls as they entered middle school and stabilized their foster placements. Overall, these findings suggest that providing preventive interventions for early adolescent girls in foster care can prevent risky behaviors.¹⁵

Figure 5. KEEP Safe Program Resulted in Better Social Skills and Fewer Placement Changes in Adolescent Girls in Foster Care



Note. * $p < .05$. Source: "Substance Use and Delinquency Among Middle School Girls in Foster Care: A Three-Year Follow-Up of a Randomized Controlled Trial," by H. K. Kim and L. D. Leve, 2011, *Journal of Consulting and Clinical Psychology*, 79, 740-750. doi: 10.1037/a0025949.

Summary

One research-based approach for helping maltreated and foster kids succeed is promoting the powerful socialization forces of functional family life.

When youth are taken out of their home, the challenge that policymakers face is supporting these vulnerable kids without breaking the bank. One research-based approach for helping maltreated and foster kids succeed is promoting the powerful socialization forces of functional family life. In all three of my programs, training and supporting parents reduced foster kids' behavior problems in schools and at home. Foster youth were also taught how to be responsible family members and friends. Together, behavior that was less problematic and more responsible improved the stability of kids' lives, reducing the downward cycle that often occurs when they are bounced from placement to placement.

The first program, Multidimensional Treatment Foster Care for foster parents, kinship parents, and birth parents, improved parenting skills in ways that decreased the number of behavior problems in seriously delinquent or mentally ill youth. At the same time, it increased the odds of placement stability and reunification with parents or relatives.

Similar results were found for KEEP (Keeping Foster Parents Trained and Supported), a less intensive approach that extended this parent-focused training to "regular" foster youth. Parents increased the proportion of positive reinforcement provided to youth, and youth exhibited fewer daily behavior problems. The effects were strongest for foster kids who needed it most—those who demonstrated more behavior problems.

This parent/caregiver-focused approach also worked when used to promote healthy adjustment and prevent substance use among early adolescent girls in foster care. In the KEEP Safe Intervention, the parent/caregiver training was supplemented by direct teaching and coaching of girls designed to increase their prosocial skills. KEEP Safe was effective in increasing prosocial skills and reducing placement disruptions.

The findings for KEEP and KEEP Safe suggest the value of a universal intervention that reaches all foster children, not just those at highest risk. One reason to provide universal treatments for foster parents is the number of lives they touch. For example, in the KEEP study, foster parents provided care for an average of 2.4 children and had an average of 13.4 previous child placements.¹⁶

In sum, over the 30 years that I have been involved in parenting programs to support foster youth, I have been impressed by the response from strong, tightly knit families. The parents in these families are willing to accept training and supervision because of their commitment to providing a positive family experience for some of society's most vulnerable children and youth.

Patricia Chamberlain is Science Director and Senior Researcher at the Oregon Social Learning Center. Over the last three decades, Dr. Chamberlain has been committed to improving the lives of children and youth in foster care by strengthening the parenting skills of their birth and foster parents. She founded the Multidimensional Treatment Foster Care, KEEP, and KEEP Safe programs, which are being widely implemented throughout the United States and in Europe. She has been the Principal Investigator on 8 randomized trials examining the effectiveness

of her family-focused approaches. Currently, she is conducting research on implementation—what it takes to integrate and scale-up research-based programs and practices to real-world agencies and systems. Her Multidimensional Treatment Foster Care (MTFC) Program was selected as 1 of 10 National Blueprint Programs for Violence Prevention by the U.S. Office of Juvenile Justice and Delinquency Prevention. In an independent analysis, for every \$1 spent on MTFC, taxpayers save more than \$17 in criminal justice and victim costs by the time youth are 25 years old. In 2013, Dr. Chamberlain was named a fellow of the Society for Prevention Research.

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